



WOMEN'S FALL VOLLEYBALL

18 and older

**Games played at
New Century Fieldhouse
on Monday evenings**

Games begin 9/14

Register as a team

\$175 per team

Registration Deadline is August 31!

Team Contact Name: _____ **Phone:** _____

Email: _____ **Address :** _____

Team Name: _____ **Circle One: Recreational or Competitive**

Payment Type: Cash Check Credit Card **If writing a check, please make payable to City of Gardner**

Credit Card Number: _____ **Exp. Date:** _____ **CVC:** _____

LIABILITY RELEASE: I, as a participant or legal guardian representing a minor participant, agree to release the City of Gardner, its officers, employees and volunteers, from any and all liability for accidents, injuries, loss of and/or damage to my/our person or property that may arise out of my/our participation in/and our presence at the above activity. I/we understand the risks and possible dangers of participating in this activity. Also, I/we authorize the Gardner Parks and Recreation Department to use at its discretion any video or photograph(s) (black/white or color) taken of the participant while participating in the program and waive any and all claims that the participant or the undersigned or their heirs, executors, administrators, or assigns may have or claim to have resulting from such videos or photograph(s) or reproductions thereof. I have entered into this agreement of my own free will.

Gardner Parks and Recreation

120 E. Main Street
Gardner, KS 66030
913-856-0936

www.gardnerparks.com

I have read and understand the liability release and refund policy. Registration invalid without signature.

Signature: _____ **Date:** _____

